Norris (R.C.)

THE PRESTON RETREAT.



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THE PRESTON RETREAT.

PRESTON RETREAT, PHILADELPHIA, July 25, 1895.

To the Editor of the American Gynæcological and Obstetrical Journal:

SIR: Ignoring the personalities and homilies of Dr. Joseph Price in his letter in your issue of July, 1895, I desire again briefly to point out some errors in his statements and to add a few more facts, after which I am done with the controversy, feeling satisfied that my own statistics at the Retreat and those of similar institutions will not in the future suffer by contrast with what was formerly thought to be Dr. Price's unbroken record. This result accomplished, I leave the matter confidently to the unbiased judgment of the profession.

In regard to the death from appendicitis and purulent peritonitis Dr. Price says: "Women commonly leave the Retreat with their husbands on the thirteenth or fourteenth day, when convalescence has been thorough, favorable and aseptic. Such was the condition of the woman referred to above." Referring to this case, I find only the following in the record of the Retreat: "A premature labor. Delivered September 11, 1889, twenty minutes after admission. Discharged September 28, 1889. Died at Pennsylvania Hospital, October 20, 1889. Suppurating appendicitis and general purulent peritonitis recognized at autopsy." Had the records of the Retreat furnished me with evidence that this patient was discharged enjoying "thorough, favorable, and aseptic" convalescence, the case would never have been referred to; but, unfortunately, the records of the Retreat do not include the pulse and temperature charts of the patients of Dr. Price, all the charts having disappeared a few days before I assumed charge of the Institution.

Again Dr. Price says: "As to having sent patients to the Pennsylvania Hospital, the statement is altogether and absolutely false, and no minute of such an act appears upon the records of the Preston Retreat." Volume III of the record of the Preston Retreat states that "Annie McM. was transferred August 19, 1887, to the Pennsylvania Hospital ill with intermittent or typhoid fever." The record of the Pennsylvania Hospital states that "Annie McM. was

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brought from the Preston Retreat and was admitted August 19, 1887, suffering with phlegmasia alba dolens; her temperature when admitted was 104° F." Further comment is unnecessary!

Dr. Price also says: "With Dr. Goodell's consent, I always included his statistics with my own." This statement, unfortunately, can now neither be corroborated nor denied. I am glad, however, that even at so late a day Dr. Goodell's last 275 cases without a death have been credited where they belong.

In reply to Dr. Price's assertion that his published statistics "were the statistics of the institution and not of an individual, nor were they ever so claimed," I need only quote again the statement that first called forth my criticism—namely, "In over fourteen hundred cases at the Preston Retreat, not to speak of the thousands of cases in my individual practice, I (Italics mine) have not resorted to the curette nor lost a case."

As to the fatal Cæsarean case, admitting that the woman's ineligibility for admission to the Retreat was first learned after her fifth delivery in the Retreat and only prior to a contemplated Cæsarean operation, the statement that not a case had been lost in the thousands of his individual practice, Dr. Price now admits is false. The death of this patient he attributes to double pneumonia; those who made the autopsy declare the death due to purulent peritonitis.

Dr. Price further says in his letter: "He [Dr. Norris] parades his conscientiousness as to the integrity of the statistics of the Retreat; he seeks the statements of some itinerant gossip, that most despicable species of the human family, to impeach them." My reply is that my facts, with the exception of those pertaining to the death of the Cæsarean case, are taken from the records of the Pennsylvania Hospital and from the records of the Retreat, which latter records, I presume, are in his own handwriting.

Finally Dr. Price says: "We appreciate the fact that his [Dr. Norris'] mortality in his own short incumbency must be very mortifying to him." What this mortality is he does not state, but he insinuates that it exceeds two per cent., and he boldly asks for my statistics, to divert attention from the question at issue, namely, the deaths in the Retreat during his incumbency and the mortality of his individual practice. Within a short time an honest and critical study of all my cases will be given to the profession. It is enough at this time to state that during my term of office (nineteen months)—throughout which period no case, however grave, has been refused admission, and no case, however alarming, has been sent elsewhere before or soon after

delivery—there have been at the Retreat four hundred and seven deliveries with one death. This death occurred in a woman who, six months pregnant, comatose, and dving with chronic Bright's disease, was brought to the hospital in an ambulance. This patient was referred to the retreat by Dr. Charles E. Cadwalader. Her respirations were fifty and her pulse one hundred and forty per minute. Every cavity of her body was filled with fluid, and serum was exuding from spontaneous ruptures of the skin surfaces of her abdomen, her vulva, and her extremities. Six days after the immediate induction of labor she died from uræmia, without convulsions, her kidnevs having secreted only a few drachms of bloody urine. During the blizzard of last winter an unknown intoxicated woman, unconscious, and dying with double pneumonia, was taken from the snow on the sidewalk and was given shelter overnight. Her death occurring within twelve hours, the case was reported to the coroner, whose records will substantiate the causes and the manner of her death. Three eclamptics, five other patients seriously threatened with eclampsia, one woman delivered by symphysiotomy—women whose labors were complicated by pelvic deformity, by malpresentations, by uterine fibroids, by placenta prævia, by post-partum hæmorrhage, by advanced phthisis, and by other serious diseases—have been delivered successfully, and have left the institution grateful for its services. I know of no case of imperfect convalescence and of but one death after discharge from the institution. The latter death occurred three months after leaving the Retreat and four months after delivery, the cause of death being pulmonary phthisis, from which disease the patient was practically dying when I received her.

Dr. Price admits and has explained that two deaths occurred in the Retreat during his incumbency, and he also admits the occurrence of a death in his "individual practice." In view of the fact that prior to the publication of my letter he claimed never to have lost a case, I am satisfied to leave the verdict of his veracity to the judgment of the profession.

RICHARD C. NORRIS.



